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**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

**NIXON PEABODY LLP**  
300 S. Riverside Plaza, 16th Floor  
Chicago, Illinois 60606-6613

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612,478	07/02/2003	Allon G. Engelman	247079-000207USPT	3126

**TITLE OF INVENTION:****Gaming Machine Having A Community Game With Side Wagering**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
<b>nonprovisional</b>	<b>NO</b>	<b>\$1510</b>	<b>\$300</b>	<b>\$1810</b>	<b>12/24/2009</b>
EXAMINER	ART UNIT	CLASS-SUBCLASS			

Omkar A. Deodhar

3714

463-042000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 Nixon Peabody LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	2.	_____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	3.	_____

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

**(A) NAME OF ASSIGNEE**

WMS Gaming Inc.

**(B) RESIDENCE: (CITY and STATE OR COUNTRY)**

800 South Northpoint Boulevard

Waukegan, Illinois 60085

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

**4a. The following fee(s) are enclosed:****4b. Payment of Fee(s):**

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies \_\_\_\_\_

- A check in the amount of the fee(s) is enclosed.

- Payment by credit card. Form PTO-2038 is attached.

- The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-4181/247079-000207USPT

**5. Change in Entity Status (from status indicated above)**

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Sorinel Cimpoes - Reg. No. 48,311Date October 30, 2009Typed or printed name Sorinel CimpoesRegistration No. 48,311

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